



Urban District of Rothwell.

Annual Report

OF THE

MEDICAL OFFICER OF HEALTH

(A. L. TAYLOR, M.D., Ch.B., D.P.H.)

AND THE

SANITARY INSPECTOR

(T. WILSON, Cert. S.I.B., A.R.San.I., M.S.I.A.)

1946

Rothwell Urban District Council.

ANNUAL HEALTH REPORT. STATISTICAL MEMORANDA FOR 1946.

Area in Acres	...	...	..	...	...	..	..	10,695
Resident Population (Mid-Year 1946)	..	..	..	..	..	..	..	23,780
Number of Inhabited Houses at end of 1946	..	..	..	..	..	..	..	7,004
Rateable Value to General Rate on 1st April, 1946	..	..	..	..	..	..	..	£105,508
Sum represented by a Penny Rate	...	...	...	...	...	...	...	£410
BIRTHS (LIVE).								
Legitimate—200 Males, 191 Females }	..	..	..	..	..	..	..	411
Illegitimate—12 Males, 8 Females }	..	..	..	..	..	..	..
STILLBIRTHS.								
Legitimate—6 Males, 4 Females }	..	..	..	..	..	..	..	12
Illegitimate—1 Male, 1 Female }	..	..	..	..	..	..	..
DEATHS	..	158 Males,	128 Females	..	..	..	..	286
DEATHS OF INFANTS UNDER ONE YEAR.								
Legitimate	10 Males,	12 Females }	..	..	..	..	..	23
Illegitimate	—	1 Female }	..	..	..	..	..
DEATHS FROM PUERPERAL CAUSES.								
Puerperal Sepsis	..	..	..	..	..	..	..	0
Other Puerperal Causes	..	..	..	..	..	..	..	0
Total	..	..	..	..	..	..	..	0
BIRTH RATE (per 1,000 estimated population)	..	..	..	..	..	..	..	17·3
STILLBIRTHS RATE (per 1,000 total (live and still births))	..	..	..	..	..	..	..	28·3
DEATH RATES :—(All per 1,000 estimated Population).								
All Causes	..	..	..	..	..	..	..	12·0
Zymotic Diseases (seven principal)	..	..	..	..	..	..	..	0·17
Tuberculosis of Respiratory system	..	..	..	..	..	..	..	0·29
Other forms of Tuberculosis	..	..	..	..	..	..	..	0·17
Respiratory Diseases (excluding tuberculosis of respiratory system)	..	..	..	..	..	..	..	1·39
Cancer	..	..	..	..	..	..	..	1·81
Heart and Circulatory Diseases	..	..	..	..	..	..	..	2·73
INFANT MORTALITY.								
All Infants per 1,000 live births	..	..	..	..	..	..	..	56
Legitimate infants per 1,000 legitimate live births	..	..	..	..	..	..	..	56·2
Illegitimate infants per 1,000 illegitimate live births	..	..	..	..	..	..	..	50
DIARRHOEA. (Deaths in infants under 2 years of age per 1,000 live births)	..	..	..	..	..	..	..	7·30
MATERNAL MORTALITY. (Deaths of mothers in childbirth per 1,000 live and still births)								
Puerperal Sepsis	..	..	..	..	..	..	..	Nil.
Other Causes	..	..	..	..	..	..	..	Nil.

RECORD OF DEATHS IN AGE GROUPS, 1946.

Under 1 year.	1-5 years.	5-15 years.	15-25 years.	25-45 years.	45-65 years.	Over 65 years.	Total.
23	9	1	7	14	73	159	286

STAFF OF HEALTH DEPARTMENT.

A. L. TAYLOR, M.D., Ch.B., D.P.H. . .	Medical Officer of Health. Medical Superintendent of the Roth- well Isolation Hospital. Medical Officer, Maternity and Child Welfare Services.
T. WILSON, Cert. S.I.B., A.R.San.I., M.S.I.A., A.M.I.P.C., Certified Meat Inspector, Certified Smoke Inspector.	Senior Sanitary Inspector and Cleansing Superintendent.
G. F. IDLE, Cert. S.I.B., M.S.I.A. . .	Additional Sanitary Inspector.
Miss M. CAMERON, State Registered Nurse, S.C.M., C.R.S.I.	Superintendent Health Visitor.
Miss E. ABRAM, Certified Midwife (Retired 30.10.46)	Health Visitor.
Miss E. RYAN, State Registered Nurse, C.R.S.I., Part I of Mid- wifery. (Left 22.2.46)	Health Visitor.
Mrs. M. WOOD, State Registered Nurse, C.R.S.I., Part I of Midwifery . .	Health Visitor.
Miss M. WHITTINGHAM	Clerk.
Mrs. I. M. GIBSON	Clerk (M. & C.W. Dept.)
K. R. Lawson	Junior Clerk. (Joined H.M. Forces, Nov., 1946)

Rothwell Urban District Council

ANNUAL REPORT

OF THE

MEDICAL OFFICER OF HEALTH, 1946.

To the Chairman and Members of the

Rothwell Urban District Council.

Ladies and Gentlemen,

I have the honour to submit for your consideration my Annual Report for the twelve months ended December 31st, 1946.

No outstanding event or epidemic occurred in the Public Health world of this Authority during the year. I am glad to say that Infectious Disease notifications continued at a very low level and I will dwell, later on, on the low incidence of Diphtheria.

There was no maternal death.

The housing situation still remains unsatisfactory and there seems to be no immediate prospect of material alleviation.

The demand for institutional accommodation for maternity cases remains high and cannot, in all cases, be met owing to the shortage of accommodation. It is hoped that this position will be eased to some extent in the near future.

The Day Nursery (the term "War Time Nursery" is no longer applicable) at Stourton is flourishing and is constantly full to capacity.

The Birth Rate is up on last year and now stands at 17·3 per thousand population. The Death Rate at 12 is satisfactory.

Matters regarding Cleansing, Disinfestation and Salvage are dealt with in the Report of the Senior Sanitary Inspector.

MATERNITY AND CHILD WELFARE.

The standard of work carried out by the Maternity and Child Welfare Service has been maintained during the year at its usual high level, and one can claim with justification that it will compare favourably with the Service of any other Authority. I have remarked for some years a steady improvement in the nutritional standards attained by infants and toddlers, and this does not yet appear to have reached its final level. Four or five years ago, the average weight of a year old baby was held to be round about 20 lbs. To-day, however, a very common figure is 23-24 lbs., and babies under 20 lbs. are looked at with suspicion as being puny and under-developed. This can be attributed partly, if not wholly, to the increased knowledge of nutrition disseminated by radio, poster and above all by the constant efforts of the Health Visiting staff who continually instruct in the basic principles of infant feeding and the vital importance of the supplementary food factors known as vitamins. This, together with the system of priority foods, has raised to an astonishing extent the general standard of infant and child nutrition and there is reason for optimism in the obviously increased knowledge and interest displayed by the average parent. It is a truism that the child is father of the man, and thus we can look forward to the next adult generation as likely to attain a high degree of physical well-being—one of the few bright spots in the present outlook.

An astonishing volume of work has been carried out by the much reduced Health Visiting staff, whose number was further reduced by the retirement of Miss Abram. The burden thus placed on the shoulders of Miss Cameron and Miss Smailes is being borne with cheerfulness and efficiency, and a very great debt is owed to them by this Authority for the amount of work and responsibility which they now have to carry. When it is appreciated that these two workers are carrying the load which was formerly borne by five Health Visitors and that there has been no diminution in the number of clinics or in essential visiting, it will be seen that the ideals of service still survive in, at any rate, one section of the community. The shortage of Health Visitors is universal and efforts are at last being made to train an increasing number of Nurses for this necessary profession. Our efforts to obtain the services of additional Health Visitors have so far been unavailing, but we are hoping that the time is now not long distant when we can once again augment the staff and so help to lighten the burden on each individual.

TABLE 1.

**CLINIC ATTENDANCES IN AGE GROUPS SHOWING
AVERAGE WEEKLY ATTENDANCE AT FIVE CLINICS.**

Clinic	Under 1 year	1-2 years	2-5 years	Total	Average Weekly Attendance
Rothwell ..	2,274	766	380	3,420	69.59
Lofthouse ..	1,095	570	480	2,145	43.77
Stourton ..	934	255	231	1,420	28.97
Oulton ..	1,000	327	292	1,619	33.03
Methley ..	1,081	328	249	1,658	35.27
Total ..	6,384	2,246	1,632	10,262	210.63

TABLE 1a.

**INDIVIDUAL CHILDREN IN CLINIC ATTENDANCE DURING
1946.**

Clinic	Under 1 year	1-2 years	2-5 years	Total
Rothwell	116	113	132	361
Lofthouse	53	66	145	264
Stourton	56	58	67	181†
Oulton	65	40	81	186
Methley	56	54	92	202
Total	346	331	517	1,194

†Inclusive of 39 cases residing in Leeds and attending Stourton Clinic.

TABLE 1b.

NEW CLINIC ENTRANTS DURING 1946.

Clinic.	Under 1 year.	1-2 years.	2-5 years.	Total.
Rothwell	146	5	3	154
Lofthouse	60	3	8	71
Stourton	46	1	1	48†
Oulton	57	4	3	64
Methley	63	2	2	67
Total	372	15	17	404

†Inclusive of 15 cases residing in Leeds and attending Stourton Clinic.

TABLE 1c.

No. OF CHILDREN (BIRTH TO FIVE YEARS) IN AREA 31st DECEMBER, 1946, WITH PROPORTION OF CLINIC ATTENDERS.

Age.	No. of Children in Rothwell Area.	No. of Children in Clinic Attendance.	Percentage of Children in Clinic Attendance.
Under 1 year	390	334	85·6
1-2 years	367	315	85·8
2-5 years	1,498	506	33·7

TABLE 2.

MEDICAL EXAMINATIONS OF CHILDREN DURING 1946.

Birth to 1 year.	1-2 years.	2-5 years.	Total.
1,158	491	351	2,000

It will be seen from the Tables that clinic attendances have been well maintained and have, in one or two instances actually increased.

The Sunray Clinics are still held on three mornings a week and are much appreciated and used. I have mentioned in previous Reports my views as to the value of Ultra Violet light for certain types of debility and ill-health in young children, and nothing that has subsequently come to my notice has altered these views. This is a valuable part of our Service and the cost of the recently acquired equipment was, in my opinion, a well expended sum.

TABLE 3.

RECORD OF SUNRAY WORK DURING 1946.

No. of Sessions	No. of Treatments given	No. of individual Children treated.				No. of Mothers treated	Total	Average Attendance per Session
		Under 1 year	1-2 years	2-5 years	School Children			
136	3,014	10	47	68	46	4	175	22·16

Including 788 treatments given to the 46 School children (5·7 per session) in accordance with arrangement with the West Riding County Council.

INFANTILE MORTALITY.

It is disappointing to have to record once again, a slight increase in Infantile Mortality, and I am bound to express the opinion that an analysis of the causes of death suggests that some, at least, of the deaths must be considered avoidable, in the sense that they were due to disease acquired after birth, and not to congenital debility or other congenital causes. It is being felt increasingly that some, at any rate, of the Neo-Natal deaths—that is, deaths of children under one month of age—might be partly due to inexperience, or unfortunate domestic circumstances on the part of the mother, and moves are on foot, following the suggestions of Dr. Tudor Lewis, for the establishment of what he calls Post-Natal Hostels, in which the mother and baby can be accommodated for a period following her lying-in. Here it is thought she might rest and recuperate before being pitchforked back into the hurly-burly and cares of domestic life and the care of her family, and here she might be taught the principles and methods of child care and feeding. These Hostels are thought to be of a special value in cases where the mother comes from what are coming to be known as “unsatisfactory households.” It is thought that the large bulk of causes of Infantile deaths having now been removed, the time has come for us to attack the minor and individual adverse circumstances which may affect the child who is born of parents in the less fortunate financial or environmental classes.

The services of Child Health Officers, who are highly qualified and experienced in the care of babies and children, are to be sought by the Local Health Authority under the new National Health Service Act, shortly to be implemented and I hope, in the very near future, to make arrangements whereby one of these Child Specialists can be made available for consultation at the Welfare Clinics or in collaboration with the family doctor in the home of the child, in all cases where help and advice of this type are likely to be of value.

An additional improvement which I am anxious to see established at the earliest possible moment, is a special Ward in some near institution to be devoted to the care of the premature baby, who will there be under the care of specially trained nursing staff and the supervision of a highly trained and qualified Paediatrician. It is only by innovations such as these that we can hope to reduce further the toll of infant deaths.

Let us not, however, be too despondent over the current Infantile Mortality rate, as it must be obvious from a glance at Table 5 that the rate has steadily come down, and is infinitely better during the last decade than ever before. Solid though this achievement is, we can, I think, still find room for further improvement, and no effort or expense are too great in pursuing such an ideal. During the year under review, the use of the special premature baby cot and the services of a Paediatrician have been available where necessary, and special foods have been issued on the request of Doctors, Midwives, or Health Visitors.

The welfare of illegitimate babies has again been an object of particular concern, and in the vast majority of cases they are found to be adequately cared for and to reach standards comparable with those of their legitimate contemporaries.

TABLE 4.
DEATHS OF INFANTS UNDER ONE YEAR.

Cause of Death.	Under 1 wk.		1-2 weeks.		2-3 weeks.		3-4 weeks.		1-3 mths.		3-6 mths.		6-9 mths.		9-12 mths.		Total.	
	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.
Acute Broncho Pneumonia.. ..	0	0	0	0	0	0	0	0	1	0	0	0	1	0	0	0	2	0
Premature Birth. Congenital Debility	3	3	2	1	0	1	0	0	0	1	0	0	0	0	0	0	5	6
Asphyxia Livida Congenial Atelectasis	0	1	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1
Convulsions. Acute Gastro- enteritis	0	0	0	0	0	0	0	0	0	0	1	0	0	0	0	0	1	0
Capillary Bronchitis.. ..	0	0	0	0	1	0	0	0	0	0	0	0	0	0	0	0	1	0
Acute infection from some cause unknown	0	0	0	0	0	0	0	0	0	1	0	0	0	0	0	0	0	1
Congenital pulmonary stenosis	0	0	0	0	0	1	0	0	0	0	0	0	0	0	0	0	0	1
Tuberculous Meningitis	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	1	0
Asphyxia following the aspiration of regurgitated food ..	1	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0
Cellulitis of Neck ..	0	0	1	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0
Gastro enteritis ..	0	0	0	1	0	0	0	0	0	1	0	0	0	0	0	0	0	2
Total ..	4	4	3	2	1	2	0	0	1	3	1	0	1	0	1	0	12	1

TABLE 5.
INFANT DEATHS PER THOUSAND LIVE BIRTHS.

1903-1912		1913-1922		1923-1932		1933-1942		1943-1946	
1903	171	1913	139	1923	82	1933	77.8	1943	42.2
1904	145	1914	120	1924	112	1934	50	1944	40.0
1905	161	1915	125	1925	72	1935	38	1945	51.7
1906	121	1916	85	1926	74.2	1936	57	1946	56.0
1907	140	1917	142	1927	65	1937	68	—	—
1908	148	1918	84	1928	71.7	1938	65	—	—
1909	112	1919	61	1929	89.3	1939	42.4	—	—
1910	133	1920	83	1930	31	1940	43	—	—
1911	116	1921	86	1931	72.2	1941	50.8	—	—
1912	58	1922	90	1932	40.9	1942	37.2	—	—
Average—		Average—		Average—		Average—		Average—	
130.5		101.5		71.0		52.9		46.0	

The following small tables deal with the comparison of still-births and neo-natal deaths, during the past five years.

TABLE 6a.

**DETAILS OF STILL-BIRTHS
FOR THE PAST FIVE YEARS.**

Year.	No. of Live Births.	No. of Still-births.	Proportion of Still-births per 100 Live Births.
1942	349	11	3.15
1943	379	7	1.84
1944	425	14	3.27
1945	367	10	2.72
1946	411	12	2.9

TABLE 6b.

**DETAILS OF NEO-NATAL
DEATHS FOR THE PAST
FIVE YEARS.**

Year.	No. of Live Births.	No. of Neo-Natal Deaths.	Proportion of Neo-Natal Deaths per 100 Live Births.
1942	349	13	3.7
1943	379	16	4.22
1944	425	17	4.00
1945	367	9	2.45
1946	411	16	3.9

Nine deaths occurred in infants between the ages of one year and five, the causes being as shown in the accompanying table.

TABLE 7.

**DEATHS OF CHILDREN BETWEEN THE AGES OF ONE YEAR
AND FIVE.**

Cause of Death.	1-2 years		2-3 years		3-4 years		4-5 years		Total	
	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.
Broncho Pneumonia	1	0	0	0	0	0	0	0	1	0
Acute Bronchitis										
Spina Bifida	1	0	0	0	0	0	0	0	1	0
Infantile Convulsions										
Congenital Idiocy	0	0	0	0	0	0	1	0	1	0
Convulsion										
Acute Gastritis	0	0	0	1	0	0	0	0	0	1
Broncho Pneumonia										
Spina Bifida										
Congenital Hydrocephalus	0	0	0	1	0	0	0	0	0	1
Staphylococcal Meningitis										
Operation	0	0	0	0	0	0	1	0	1	0
Cerebellar Arachnoiditis										
Encephalitis	0	0	0	0	0	0	1	0	1	0
Haemophilia	0	0	0	0	1	0	0	0	1	0
Tuberculous Meningitis	0	1	0	0	0	0	0	0	0	1
Total	2	1	0	2	1	0	3	0	6	3

Day Nurseries.—Stourton Day Nursery, as has already been stated, continues to thrive and it is a matter of great personal satisfaction that in spite of the cessation of the one hundred per cent. grant, the Council decided to continue this excellent and much needed establishment. That their action was far sighted is, I think, amply proved by the present clamour for the setting up, throughout the country, of more Day Nurseries. Stourton Nursery has always been full to capacity, and at the time of writing there are children awaiting places in excess of the number which can be accommodated. The Day Nursery should, in my opinion, exercise a wider function than that of merely "minding" children whose mothers wish to go out to work, and should subserve a social purpose in addition to the foregoing. Thus the child of the mother in hospital, lying-in, debilitated, or the victim of unfortunate domestic circumstances, could be accommodated for a period with beneficial results to both mother and child. A particular value of this Service is its teaching to the youngsters of regular habits and the elements of personal hygiene at a most impressionable age, and I venture to suggest that, at any rate, a portion of the total number will derive a real and lasting benefit in that sphere.

It would not be proper to conclude this section without a word of appreciation for the Matron, Mrs. Lovell, who has held her position from the opening of the Nursery some five years ago. It is not too much to say that the success of the Nursery is almost entirely due to the whole-hearted and able manner in which she has carried out her duties. The happy atmosphere amongst staff and parents, and the fact that the staff at the Nursery stay for very long periods, is sufficient evidence of the efficiency with which the institution is administered, and I should like to take this opportunity of paying to Mrs. Lovell my personal tribute for the excellent and conscientious manner in which she has carried out her duties, often under very considerable difficulties.

ANTE-NATAL CLINICS AND MATERNAL WELFARE.

No maternal death was recorded during the year, the Maternal Mortality rate thus becoming 1·06 for the average of the last five years. The attendance at the Ante-Natal Clinics was well maintained and is above the average for preceding years. It must be confessed that this may be partly due to the desire of many mothers to obtain institutional accommodation and not to any increased knowledge for the need and value of regular and careful ante-natal supervision. It must be stated that so long as a mother is adequately cared for and regularly examined during her pregnancy, it is of no account whether she attends the Clinic or is under the care of her own family doctor. The one essential is that she should obtain ante-natal care and should not come to the end of her pregnancy without very careful ascertainment of her degree of normality and obstetrical needs. Only in this way can be achieved a minimal of obstetrical complications during childbirth and of infantile deaths due to avoidably difficult labours.

It is hoped that the Isolation Hospital, since the end of this year no longer used for the reception of Infectious Diseases, will be converted at a reasonably early date into a Maternity Home under the administration of the County Council, and that this centrally situated Home will serve, to a very large extent, the need, well recognised in this Authority's area, for institutional beds for normal midwifery. I see no reason why, although the provision of new buildings is said to be out of the question, a very efficient and reasonably satisfactory Maternity Home should not be set up and should not meet all the needs of our own mothers. At present, as you know, we are dependent on the County General Hospital and Walton Hall, where our mothers are invariably treated with efficiency and kindness, but the considerable journeys involved add in no small degree to the rigours of childbirth, and it will be a great day when a mother knows that she can have her baby within a few minutes journey of her own home.

TABLE 8.
DETAILS OF ATTENDANCES AT ANTE-NATAL CLINICS
DURING 1946.

Clinic.	Total No. of Expectant Mothers Attending.		New Cases		No. of Sessions held.	Average attendance per session.	Gross total of Attendances.
	New Cases	Old Cases	Primiparae	Multiparae.			
Rothwell	302	63	147	155	102	21.14	2,157
Methley	32	3	10	22	24	4.4	105
TOTALS	334	66	157	177	126		2,262

N.B.—2,262 includes 13 attendances Post-Natally of 13 women.
66 cases carried over from 1945 are also included in the 2,262.
158 cases carried forward into 1947 for delivery.

TABLE 8a.
PERIOD OF PREGNANCY AT WHICH FIRST ATTENDANCE
(1946) TOOK PLACE.

1st month	2nd month	3rd month	4th month	5th month	6th month	7th month	8th month	9th month	Not Pregnant	Total.
5	29	115	90	43	27	15	7	—	3	334

TABLE 9.

**ABNORMAL CONDITIONS ARISING IN CASES IN ANTE-NATAL
CLINIC ATTENDANCE.**

Hypertension	5	Transverse Lie	1
Persistent Breech	3	Premature Births	3
Pyelitis	2	Premature Birth with Ante-	
Pre-Existing Nephritis	1	Partum Haemorrhage	1
Mitral Stenosis	1	Placenta Praevia, Premature	
Toxaemia	1	Birth	1
Low Blood Pressure	1	Placenta Praevia, Premature	
Breech Presentation	2	Birth, twins	2
Disproportion, admitted to		Premature Twins	3
Hospital for Caesarian Section	9	Placenta Praevia	3
Admitted to Hospital for Cae-		Instrumental Deliveries	7
sarian Section and Sterilisation	1	Medical Induction in Hospital	4
Stillbirths	5	Premature Twins (1 stillborn)	1
Hydrocephalic Stillbirths	2	Albuminuria	3
Miscarriages	8	Adherent Placenta	1

TABLE 10.

**CONFINEMENT ANALYSIS OF THE CASES IN ANTE-NATAL
CLINIC ATTENDANCE DURING 1946.**

Normal Deliveries		Left the area	4
(Hospital 96)			
(Home 101)	197	Due for delivery in 1947	158
Abnormal Deliveries			
(Hospital 32)			
(Home 9)	41		
			400

I cannot conclude this section of the Report without once again expressing my thanks to the loyal band of Voluntary Workers whose regular and unobtrusive help in the Clinics is of such great value, even more now than formerly because of the shortage of Health Visiting Staff. Their work is much appreciated by all those, staff and mothers alike, who are in Clinic attendance.

TABLE 11.
RECORD OF HOME VISITATION.

First Visits (under one year)	..	..	..	369
Re-visits (under one year)	..	..	..	2,344
One to two years	..	..	..	2,938
Two to five years	..	..	..	7,880
Ante-Natal First Visits	..	..	..	102
Ante-Natal Re-Visits	..	..	..	221
Total Home Visits				<u>13,854</u>
Total Clinic Sessions held during 1946 :—				
Infant Welfare	..	..	..	243
Ultra Violet Ray	..	..	..	136
Ante-Natal	..	..	..	126
Dental Sessions	..	..	..	—
Consultative Ante-Natal Sessions	..	..	..	1
				<u>506</u>

RESCUE SERVICES.

Hospital treatment for all emergency maternity cases.

Hospital treatment for cases in which housing conditions are undesirable.

Hospital provision (free) for all cases of Puerperal Pyrexia.

Ambulance free in all above cases.

Consultative Ante-Natal Clinic with Specialist in attendance.

Consultation at home with Specialist in cases of abnormalities, arising ante-natal, post-natal, or during labour.

Child Welfare, ante-natal and post-natal Services (under our own control) with Medical and Health Visiting Staff.

Provision (free) for X-ray examination of maternity cases of dubious diagnosis.

Immunisation (Diphtheria) Clinic.

Home consultation with Ophthalmic Specialist in emergency cases.

Hospital provision for cases of Ophthalmia Neonatorum.

Orthopaedic hospital provision for children under five.

Provision of dental treatment for expectant and nursing mothers.

Provision of dental treatment for children under five.

Assisted Scheme.—Grants of dried milks and Cod Liver Oil, at reduced terms in accordance with income.

Provision of Sunray treatment for debilitated children under five and for expectant Mothers.

Home Helps.

Convalescent Home Provision for Debilitated Mothers and their Infants, and for Children under five.—These services were not available during 1946, as the Homes were closed during the War.

Health Visitors.—The staff was further diminished during 1946 by the resignation of Miss Ryan in February and the retirement of Miss Abram in October, thus at the end of 1946, the staff consisted of two Health Visitors, one being the Superintendent.

Child Life Protection.—At the end of 1946, there were four foster mothers who were nursing children for reward in this area.

Dental Treatment for Children under five and for Expectant and Nursing Mothers.—The arrangement previously holding is still in existence. Increasing stress is being laid upon priority for dental treatment for expectant mothers, and young children, and a considerable expansion of the Dental Services is to be expected as soon as staff, premises and equipment are available.

Ophthalmic Service.—Provision is made for home consultation with Ophthalmic Specialist in emergency cases and hospital treatment is available for all cases of Ophthalmia Neonatorum.

Orthopaedic Provision.—Orthopaedic Hospital provision is available for children under five.

Contributory Payments towards Bus Fares.—In the case of women attending the Ante-Natal Clinics, contributory payments are made by the Authority towards the cost of bus fares.

Nursing Homes.—No Nursing Homes have been registered in this District and no action has been found necessary.

HOME HELP CASES, 1946.

Total number of cases attended by Home Help Nil.

HEALTH ADMINISTRATION.

Laboratory Facilities.—The help of the County Laboratory has again been freely available throughout the year, and all investigations have been promptly and successfully carried out. From time to time a wide variety of pathological and bacteriological problems arise in the work of the Health Department, and it is of very great assistance to have the backing of such an efficient and completely equipped laboratory. My thanks are due to the County Medical Officer for making available this Service.

Ambulance Facilities.—(a) For Infectious Disease. (b) Non-Infectious Disease, and Accidents. No charge is made in the former case and an approved scale of charges is in operation for the latter.

I have remarked previously on the need for extended ambulance facilities, and there is reason to believe that a move is on foot to co-ordinate and expand ambulance services throughout the County area, and to make this extended service available free of charge to the individual user. It is hoped that this scheme, which is one of the provisions of the 1946 Public Health Service Act, will be put into effect during 1947.

Nursing Provision.—The three Nurses employed by the Voluntary Nursing Associations are still carrying out their duties and doing valuable work. Here again, the National Health Service Act suggests a fusion of this Service with the general Public Health Nursing Service, and we can look forward to closer co-operation than ever before in this field of activity.

Treatment Centres and Clinics, including Clinics used solely for Diagnosis or Consultation :—

- (a) Five Welfare Clinics ; one, the Central Clinic at Rothwell, and one each at Stourton, Lofthouse, Methley and Oulton.
- (b) Ante-Natal Clinic held twice weekly at the Central Clinic, and fortnightly at the Methley Clinic.
- (c) Post-Natal Clinic held weekly at the Central Clinic.
- (d) Staff of three Health Visitors, one being the Supervisory Head.
- (e) Panel of Home Helps.
- (f) Scabies Clinic. Since the closing down of the Rothwell First Aid Post, the Scabies Clinic has been held at the Central Clinic, Rothwell.

Hospitals—Public and Voluntary.—The Council maintains its own Hospital for the isolation and treatment of Infectious Disease.

Nursing Staff.—The continued difficulty of obtaining qualified Health Visitors is rendering essential the use of Nursing Auxiliaries when these are available. It is said with truth that half a loaf is better than no bread, and I am convinced that whilst the primary function and field of action of the Health Visitor is, as her title implies, in the home, a great deal of her non-visiting work in Clinics can be carried out with reasonable satisfaction by auxiliary nursing and partly trained clerical staff, thus easing the burden and liberating a bigger proportion of her time for the type of work for which she is primarily suited and responsible.

Great efforts are being made to increase the supply of Health Visitors by various assisted training schemes. At present, however, supply is barely keeping pace with retirements and, at the best, it will be some years before the present shortage is even partly remedied.

WATER SUPPLY.

The water supply for the district has been obtained as usual from neighbouring Authorities in the following amounts during the year :—

Leeds Corporation	255,057,000	gallons
Morley Corporation	21,246,000	„
Wakefield Corporation	32,298,000	„

Of this quantity, 168,210,000 gallons were used for trade purposes and the balance of 140,391,000 gallons was allocated to domestic purposes and leakage respectively.

The average daily consumption per head for domestic purposes was 16·0 gallons, and, for trade purposes, 19 gallons.

Throughout the year, the water supply has been satisfactory in both quality and quantity. Twenty bacteriological examinations and twenty-two chemical analyses were made, samples being taken throughout the district. The water supply to all parts of the area is without Plumbo-Solvent action. During the year, the usual small number of complaints were investigated, but found to be groundless.

The following is an example of the result obtained by analysis of the mains water of this district, and is typical of all the samples taken.

Bacteriological Test.

Number of organisms per 1 cc. after 3 days @ 20-22°C. . .	30
Number of organisms per 1 cc. after 2 days @ 37°C. . .	1
Bacillus Coli Aerogenes. No. per 100 ccs. . .	Less than 1

This is a class 1 water.

Chemical Test.

	Parts per 100,000
Total Solids	7·0
Chlorine	1·2
Nitrites	none
Nitrates	A trace
Free ammonia	·005
Albuminoid Ammonia	·008
Metals	None
Total Hardness	3·6
pH	7·2

This is a water of satisfactory organic quality.

All the wells supplying water to houses were closed during 1946, and there is now a piped supply to every house in the district. There are also in this district three Stand Pipes supplying water to three houses. The houses concerned are canal lock houses situate on the Northern side of the canal, the water service being on the Southern side.

Drainage and Sewerage.—Once again it is necessary to comment on the inadequacy of the main sewer which runs through the Park. Priority has been given to the scheme for replacement, but in the present situation it is difficult to see how this can immediately be made effective.

Rivers and Streams.—No action necessary during the year.

Closet Accommodation.—Details of conversions and improvements will be found in the Sanitary Inspector's Report.

Public Cleansing.—I would refer you to the Sanitary Inspector's Report.

Shops and Offices.—No statutory action has been found necessary, but routine inspection is carried out.

Camping Sites.—See Sanitary Inspector's Report.

Swimming Baths and Pools.—No public baths in this area.

Eradication of Bed Bugs.—Disinfestation is carried out by the Local Authority as previously. Very few premises have been found to be infested and the use of D.D.T. has simplified still further the eradication of infestations of bed bugs.

Factories and Workshops.—The provisions of the above Act so far as they apply to the Local Council are enforced where necessary. We rely in the main, on the good offices of H.M. Factory Inspectorate who advise us of their defects or omissions which they note in the course of their routine examinations. We do, so far as time permits, carry out inspections of factories and workshops, so that between the two, this particular phase of work is adequately covered. Lists of outworkers are supplied by the neighbouring authorities and these are investigated where thought necessary, although it is noteworthy that remarkably little power exists to deal with any unsuitable conditions found.

HOUSING.

I wish I could report an improvement in the general housing position, but this I am entirely unable to do. Not only is the provision of new housing accommodation not catching up with arrears, but I am afraid that we are even losing ground owing to the increased birth rate and the dilapidation of much old property which has got past the stage when it can be satisfactorily repaired. A very difficult problem confronts us regarding those individual unfit houses which cannot be repaired and made habitable at reasonable cost. Logically, these should be made the subject of Closing Orders which would automatically ensure prior consideration for the tenants in obtaining new Council houses. At the present rate of building, however, this would mean virtually that only this class of tenant would be re-housed at all, and in view of the many urgent claims both on health and social grounds, this procedure could not be justified. The only solution to the problem is a rapidly accelerated rate of building and no other measure will be of any avail.

Two individual unfit houses were represented during the year, undertakings being accepted in each case not to re-occupy. These houses were not vacated during 1946.

Details of housing inspection and repairs required to be done during 1946 will be found in the Table in the Sanitary Inspector's Report.

The following Table is self-explanatory :—

TABLE 12.
HOUSING ACTIVITIES DURING 1946.

No. of Houses inspected.			No. of Visits made.		
Under Housing Act.	Under Public Health Act (Minor defects)	Total	Under Housing Act.	Under Public Health Act.	Total
388	595	983	619	1,046	1,665

Informal Notices.		Statutory Notices.	
No. issued.	No. completed.	No. issued.	No. completed.
530	436	93	91

PREVALENCE AND CONTROL OF INFECTIOUS DISEASE.

By far the largest incidence of Infectious Disease was that of Whooping Cough with 138 notifications, approximately double those of 1945. There is still no evidence that immunisation is a reliable protection against this disease. Carefully controlled experimental work is, however, being carried out in several places throughout the country and it is hoped that the agent used will prove effective. From an administrative point of view, it would be desirable if immunisation against Whooping Cough and Diphtheria could be carried out at the same time and in the same injection. This would simplify enormously the procedure and would avoid the understandable reluctance of the parent to subject her child to repeated needle pricks.

Measles dropped to 32 cases, which is customary in the inter-epidemic period.

Scarlet Fever, still a mild illness, was steady at 85 cases, more than half of which occurred in the five to ten age group.

The low incidence of Diphtheria, two mild cases, continues to be a source of great satisfaction. Although boasting is to be deprecated, I feel that a sober review of the position both locally and nationally, suggests that the day of Diphtheria as an epidemic disease is now over, and that so long as the present percentage of immunised children can be maintained or improved, we need not expect more than sporadic cases at rare and infrequent intervals. Other notifiable diseases were of negligible incidence and the over-all picture of the year is an uneventful one.

Diphtheria Immunisation.—The rate of Immunisation was very well maintained throughout 1946, and the methods which we have used consistently are still proving eminently satisfactory in obtaining the maximum response from parents. It is very exceptional now to meet with a blank and persistent refusal, and the percentages will, I think, speak for themselves. I mentioned last year, my intention of giving "booster" doses to children who had been immunised some years previously, and this intention was carried out with the result that a refresher dose was given to 1,765 school children. This procedure has been found, by test, to produce a very high level of resistance and to ensure still further, protection against Diphtheria.

TABLE 13.
CASES OF NOTIFIED INFECTIOUS DISEASES IN AGE GROUPS
(EXCLUDING TUBERCULOSIS).

DISEASE	Under 1 yr.	1-2 yrs.	2-3 yrs.	3-4 yrs.	4-5 yrs.	5-10 yrs.	10-15 yrs.	15-20 yrs.	20-35 yrs.	35-45 yrs.	45-65 yrs.	Over 65 yrs.	Total.
Smallpox	—	—	—	—	—	—	—	—	—	—	—	—	0
Scarlet Fever ..	1	3	4	2	5	50	15	1	4	0	0	0	85
*Diphtheria ..	0	0	1	0	0	1	0	0	0	0	0	0	2
Pneumonia ..	1	0	2	2	1	2	0	0	5	2	3	2	20
Puerperal Pyrexia	0	0	0	0	0	0	0	0	2	0	0	0	2
Paratyphoid Fever	0	0	0	0	0	0	0	1	1	0	0	0	2
Ophthalmia													
Neonatorum ..	0	0	0	0	0	0	0	0	0	0	0	0	0
Cerebro-Spinal													
Fever	1	0	0	0	0	0	0	0	0	0	0	0	1
Erysipelas ..	0	0	0	0	0	0	0	0	1	4	6	2	13
Measles	5	2	4	4	4	10	3	0	0	0	0	0	32
Whooping Cough ..	16	13	26	15	19	49	0	0	0	0	0	0	138
TOTALS ..	24	18	37	23	29	112	18	2	13	6	9	4	295

* 6 cases of suspected Diphtheria also notified, but proved "Negative."

TABLE 14.
IMMUNISATION RECORDS, 1946.

	1 to 5 years.	5 to 15 years.	Total.
Immunised in Clinics ..	420	47	467
Immunised in Schools under W.R.C.C. Scheme	0	0	0
"Booster" doses carried out in Clinics	19	0	19
"Booster" doses carried out in Schools	0	1,765	1,765

Percentage of Child population immunised as at 31st December, 1946:—

Birth to five years 73.2 per cent.

Five to fifteen years 87.2 per cent.

TUBERCULOSIS.

Very little change in the incidence of this disease is to be recorded. Some increase in the number of new cases may be accounted for by the improved facilities for diagnosis and the increasing use of mass radiography. Thus one may hope that earlier

ascertainment may make possible prompt measures for ensuring optimum treatment for early cases, with consequent increased prospects of recovery. Nutrition and environmental circumstances at home and at work are of the utmost importance, and any successful attack on Tuberculosis must take into account these factors.

There was some diminution of deaths from respiratory Tuberculosis, this year's figure being seven as against eleven recorded last year.

As one means of diminishing the spread, I have been successful in obtaining the Council's approval to giving prior consideration in the provision of a Council house to all families where open pulmonary Tuberculosis exists under circumstances which preclude the segregation of the patient in a separate bedroom. This measure will diminish the all too common instance of infection within the home circle of the sufferer.

No action was found to be necessary under the Public Health (Prevention of Tuberculosis) Regulations, 1925 (relating to persons suffering from Pulmonary Tuberculosis employed in the milk trade) or under Section 172 of the Public Health Act, 1936 (relating to the compulsory removal to hospital of persons suffering from Tuberculosis).

TABLE 15.
NEW CASES AND MORTALITY DURING 1946.

Age Periods.	NEW CASES.				DEATHS.			
	Respiratory.		Non-Respiratory.		Respiratory.		Non-Respiratory.	
	M.	F.	M.	F.	M.	F.	M.	F.
Under 1 year ..	0	0	0	0	0	0	1	0
1- 5 years ..	0	0	1	0	0	0	0	1
5-15 years ..	0	0	1	2	0	0	0	0
15-25 years ..	3	3	0	1	0	2	0	0
25-35 years ..	5	4	0	0	0	0	0	0
35-45 years ..	3	0	1	2	2	0	0	1
45-55 years ..	3	2	0	0	0	1	0	0
55-65 years ..	1	3	0	0	1	1	0	0
Over 65 years ..	1	0	1	0	0	0	0	0
Totals ..	16	12	4	5	3	4	1	2

Of the ten deaths due to Tuberculosis, four were unnotified, giving a ratio of 2 in 5 of non-notified Tuberculosis deaths to total Tuberculosis deaths.

INFESTATIONS.

A further diminution in the number of Scabies treatments is to be noted, and my experience suggests that this infestation is on the decline. Treatment is still being carried out at the Central Clinic and the results have been uniformly good. Not the least factor in this satisfactory state of affairs is the conscientious way in which the treatment is carried out by the trained attendants.

Pediculosis is, as usual existent to some degree, but its incidence is certainly no greater than normal. Treatment by lethane oil is still the method of choice and nit combs are provided where necessary. There is no need to lay any special emphasis on the incidence of this infestation, which I believe to be diminishing.

No action was necessary during the year for the cleansing of verminous persons.

TABLE 16.
SCABIES TREATMENT.

	1946		1945	
	Scabies cases treated.	Contacts treated.	Scabies cases treated.	Contacts treated.
Men	15	6	29	14
Women	23	15	38	22
Children (under 16 years) ..	67	6	66	14
Totals	105	27	133	50

In addition to the above figures, 20 cases and 4 contacts residing outside the area were treated during 1946.

I am again glad to pay tribute to Mr. Wilson, the Senior Sanitary Inspector and to the staff of the Health Department for the competent and conscientious manner in which they have carried out their duties throughout the year. Free exchange of information and a cordial spirit of mutual assistance have made the integration of all aspects of environmental health work pleasant and efficient.

ISOLATION HOSPITAL.

This paragraph represents the "Swan Song" for Rothwell Isolation Hospital which took in its last new case on December 31st, 1946. As predicted, the Hospital was closed down at the end of 1946, and all future infectious diseases are to be admitted to Seacroft Hospital, Leeds. This step is in line with the modern trend in fever practice. A diminishing incidence of disease has led to a progressive fall in the need for fever hospital beds and a changing outlook in the field of treatment has rendered the old-fashioned, open-ward, three-block, fever hospital entirely out of date and one was constantly faced with the situation where a twenty-bedded Scarlet Fever unit contained only one or two patients, whilst a variety of other diseases, urgently needing hospitalisation, had to be refused admission.

Seacroft, with its adequate provision of cubicle beds, offers greatly improved nursing and treatment facilities, and the change brings about one or two desirable alterations. First of all, a very considerable saving in cost should be achieved if the intake of patients remains at the average taken over the last five years. Secondly, the staff released will become available for duties where their time and skill will be put to much greater use and, last but I hope, by no means least, the Hospital itself will become available for other purposes. A scheme is afoot whereby the Hospital is to be converted for use as a Maternity Home, a provision which has long been recognised in this area as of paramount need.

The intake of cases during the last year of its use was roughly similar to that obtaining in recent years, and calls for no particular comment.

In paying this final tribute to Miss Edwards, the Matron, may I thank her for her loyal co-operation and express my hope that she will be happy in her new position at Scarborough, where she has gone to take up duty as Matron of the City Isolation Hospital.

TABLE 17.
Showing Particulars of Cases of Admission and Discharge
(Civilian) during 1946.

Disease.	Admissions			Discharges		
	M.	F.	Total	M.	F.	Total
Scarlet Fever	31	38	69	36	40	76
Diphtheria	5	3	8*	5	3	8
Paratyphoid Fever ..	1	1	2	1	0	1
TOTALS ..	37	42	79	42	43	85

*Of the above eight cases of Diphtheria, six (four males and two females) were proved "Negative."

Three additional cases were admitted to Hospital as suspected Scarlet Fever but were re-diagnosed, two as Rubella and one as Measles.

In addition to the above, twelve patients from outside the Rothwell Area were admitted to Hospital and treated; the cases were—three of Chicken Pox, one of Pemphigus and eight of Whooping Cough.

TABLE 17a.
Showing Particulars of Admission and Discharge of Members
of H.M. Forces, during 1946.

Disease	Admissions			Discharges		
	M.	F.	Total	M.	F.	Total
Scarlet Fever	7	0	7	8	0	8
Chicken Pox	2	0	2	2	0	2
Mumps	2	0	2	2	0	2
Meningitis	1	0	1	1	0	1
Rubella	2	0	2	2	0	2
Erysipelas	0	0	0	1	0	1
Total	14	0	14	16	0	16

Mortality Rate.—One death occurred in the Isolation Hospital, this being from Typhoid Fever. This gives a Hospital death rate of 1·1 per 100 patients discharged.

In concluding this Report, I would once again like to pay tribute to the Chairmen and Members of the Public Health, Maternity and Child Welfare, and Hospital Committees for the unfailing support, co-operation and consideration which they have shown me throughout the year.

I beg to remain, Ladies and Gentlemen,

Yours faithfully,

A. L. TAYLOR,

Medical Officer of Health.

Rothwell, 1947.

ANNUAL REPORT

OF THE

Senior Sanitary Inspector and Cleansing Superintendent, for the year 1946.

*To the Chairman and Members of the
Rothwell Urban District Council.*

Ladies and Gentlemen,

I now beg to submit to you my fifteenth Annual Report on the work of the Health and Cleansing Department for the year ended December, 1946.

Housing.—Sixteen years have passed since I was first privileged to make report to you and, in looking back over those years, I wonder how far the hopes that were expressed in 1932 and subsequently have been implemented. After glancing back through my annual reports I wonder how far we have succeeded, or alternatively how far we have failed, to deal with the problems which then confronted us and which, to me, seem to still confront us to-day. Perhaps it is inevitable and unavoidable, but it seems lamentable that the basic need of English life, that is the home, is still wanting in so many, many thousands of cases.

I would quote from my 1932 report : “ There is still a demand in the district for houses at rents which can be paid by members of the working classes, and overcrowding is caused largely by this house shortage. Elder children of a family, on reaching seniority, become married and include their partner in a house which, already filled to capacity, becomes overcrowded. The position becomes more aggravated when the newly married couple begin to rear progeny of their own.”

This was true at the time I wrote it and how much more true it is to-day. In spite of the houses which have been built, there are still masses of people to-day whose immediate need and desire is to have a house of their own and whose chances of so doing seems to be extremely remote.

I know war has intervened, but war or no war, the process of life still goes on ; so are we to tell the prospective fathers and mothers not to get married or not to rear children until they can have a house suitable for the purpose ? Or have they to marry and multiply higgledy-piggledy in someone else's home ? A dull picture, ladies and gentlemen, with which to start an annual report, but this is just how it appears to me on reading through my previous reports before commencing this one. It fills one with a sense of dissatisfaction and unrest, brought about perhaps by sitting down to write a report, when all these things become crystallized in front of one.

On looking at the position from a practical point of view, I wonder if there is more that we could have done and whether we are failing in any particular point, but for the life of me, I cannot see how we can improve it. I am afraid of becoming so inured to the problem that I fail to deal with each particular request as a personal problem and merely as one little bit of all that which goes to make up the day's work. After all, the provision of a house to the person who is applying for it, who may want to get married, or who may be married and have one or more children living day by day under the most unhygienic conditions, is, to that person, a very serious and intimate personal problem, and I would assure the members of the Council that we do, in the office, try to realise and appreciate just what the application means, and if we cannot conjure a house out of the hat, we can, perhaps, give some sympathy, understanding and practical assistance.

I feel some little satisfaction too, in the thought that the Councillors of this area are as keen as the officials to procure at the earliest possible moment, a house for everyone who wants one.

From the foregoing, you will have gathered that the housing position is far from good. Statistically we have done quite a lot. The tabulated statement at the end of the report will show to you that much work has been done in improving and ameliorating conditions in existing properties.

In the Mickletown portion of the area, a block of houses, long since unfit for human habitation, and whose life has been extended only by the intervention of the war, was flooded and I felt that it was time that some action was taken. We were informed that the Clearance Order Procedure was not available, but after some negotiations, I secured an undertaking from the owner that the houses would not be relet if the tenants were re-housed by the Council. This gave a clear way to re-house the tenants in accordance with the points scheme without the thought that the houses would be immediately re-occupied and, in fact, become stepping-stones to Council houses, or if re-occupied by tenants who were not able to secure a Council house, would become permanently occupied, a feature which was eminently undesirable.

During 1946 we did experience shortages in materials and labour which held up work which was required and which often the owners were anxious to execute, but taken by and large, a lot of useful work was done.

During the latter part of 1946, the Housing Committee and the Council, in a desire to be perfectly impartial in house-letting and to give the occupancy of the few houses, which from time to time became vacant, to the most deserving cases, decided to use a points scheme and after much animated discussion and many heart-burnings, a scheme was evolved. I would say here and now, that

whether subsequent events will require the alteration of the scheme and whether the allocation of points for this and that will later require to be amended in the light of experience, is a matter which only time will tell, but the proper use of a scheme of this nature is bound to sort out the worst cases and assure that the houses are given to them. The only criticism can be on the original allocation of points and as I have just said, time will show whether these require alteration.

As the points scheme required new applications forms, the Council wisely decided to cancel all existing application forms on a certain date and to start de novo, so that everyone's applications were then renewed. Then came the task of checking these forms for points value and the Health Department was required to assist on such matters as overcrowding, the presence or absence of pulmonary diseases and as to whether the houses were scheduled for clearance or demolition. This was a fairly heavy task but we were glad to do it because we felt that the work was at least positive and was getting somewhere. After the first rush, the thing settled down and it has become routine now to check these new applications as they arise.

During 1946, erection of new houses, both privately and on the part of the Council, recommenced and during the currency of the year 14 private houses and 82 Council-owned bungalows, comprising 12 permanent and 70 temporary, were actually completed.

During the year the following statutory action was taken :—

Number of Legal Notices (Housing) served under Section 9 of the Housing Act, 1936	8
Number of the above Notices complied with	6
Number of Legal Notices (Public Health) served	85
Number of above Notices complied with	85
Number of Houses represented under Section 11 of the Housing Act, 1936	2
Undertakings accepted not to re-use	2
Number vacated during 1946	0

Nuisances.—During the year 292 complaints were received regarding stoppages in drains, sink pipes and the like, and these were dealt with by the Cleansing Department staff as is customary. 284 drains were cleared from obstructions and 8 sink waste pipes cleansed, a total of 292 altogether. Statutory action was not required in any of these cases.

Tents, Vans and Sheds.—During 1946, certain caravans came on to the feast ground at Rothwell and occupied the land for the maximum period permitted by the Public Health Act. The presence of other caravans on the ground at the end of the year constituted an offence in my opinion, and the matter was still under consideration at the end of 1946 and will be referred to in my report of 1947.

An application to install a caravan permanently at Woodlesford was refused by the Council and the van was subsequently removed.

A further caravan was noted at Mickletown, the occupants of which intended to stay there during the winter months and the threat of legal proceedings was necessary before this caravan left the district.

Refuse Collection and Disposal.—As I told you in the last report, the difficulties in the work of 1945 carried through into the early part of 1946, but other than this early upset the work continued through the year without any serious delay. The Four Karrier Bantam 7 cube yard refuse vehicles which we have, served very satisfactorily, and in November we acquired a further vehicle, this time a 10 cube yard Derby type body fitted on the same Bantam chassis. This vehicle is designed to collect shop salvage (which is light and bulky) in addition to the ordinary refuse collection.

I hope in future, although it was too late in 1946 to commence, to have one of the earlier Bantams as a spare, working the cleansing of the district with four machines, which will allow for overhauls and break-down to be covered by the spare machine, without having to recourse to hiring. The spare machine will also perform the work of food salvage collection which we are still under direction to perform.

We were able to obtain as recruits to the service, two or three younger men, some released from H.M. Forces, and were able to dispense with the over sixtyfives who, as I have commented previously, performed such yeoman service during the past war years. Cleansing is not a job for the aged or the infirm and although we would have suffered hardly had we not had the older men to help us, it is right that they should enjoy their retirement, and the service generally benefit by the inclusion of younger, active men.

Disposal continues to be by controlled tipping. No further tips being used, other than those we already have. These were fairly well maintained and no complaint was received other than that of crickets at two tips. Fortunately the infestation occurred late in the year and the cold weather disposed of the nuisance more quickly than we could.

The seven days collection of dustbins and twentyone days emptying ashpits was maintained and during the year 6,073 motor loads of refuse were collected and conveyed to disposal points.

The cesspool machine operated by this Department still continues to function satisfactorily and in addition to emptying the cesspools in the area, performs the work of street gulley emptying when not otherwise engaged.

A cesspool serving a block of four houses was, during the year, abolished, and a connection made to a sewer which was extended for the purpose.

Salvage.—Kitchen waste is still the chief item of salvage and, as previously, the collection is from bins sited in various parts of the district; the bins being emptied weekly and the raw kitchen waste transported to Leeds, from where a return load of processed pig food is brought and sold to pig-keepers in the district.

The idea of bringing this return load was to avoid the cost of an empty journey, but the margin we are allowed between the purchase and sale price of the processed food is so small, and the amount of trouble involved in the storing and sale, and the rendering of accounts, is so onerous that I am beginning to think that we would do well to discard this side of the service which we are under no direction to perform altogether, and carry out only the part which we are required to do.

A bonus was paid to the workmen for salvage collection during 1946, a total of £56 13s. 7d. being divided amongst them. Appended is a table showing the weight and value of the materials salvaged, a total very similar to last year.

TABLE SHOWING WEIGHT AND VALUE OF MATERIALS SALVAGED.

Material.	Weight.				Income.		
	Tons.	Cwts.	Qrs.	Lbs.	£	s.	d.
Baled paper	51	0	2	0	304	2	7
Unbaled paper		1	3	7		19	3
Textiles	2	6	3	0	32	14	0
Food scraps	126	1	2	0	177	8	2
Bones		7	2	0	1	19	2
Broken glass "cullet" ..	2	15	0	0	2	15	0
Bottles and jars		1,194	dozen		53	9	11
Corks	9	dozen				1	6
Total ..					£573	9	7

Sewers and Drains.—With the commencement of house building, the task of inspecting and smoke testing the drainage of such buildings fell on us again and all the drains at such properties were passed by this Department before the house was declared by the Building Surveyor to be fit for human habitation. New drainage work to existing houses and buildings was supervised by this Department; 20 properties being so redrained.

The scheme for the drainage of property in Queen Street, Stourton, to avoid flooding in heavy storm time was completed during 1946. Very briefly, this provided for the collection of roof water separate from the sewage and its disposal to a different point, so that the branch sewer which is controlled by a reflux valve at a point before it joins the main, would not be overtaxed when the valve was in operation in heavy storm times.

Some damage was caused to a sewer in Rothwell by mining subsidence and this sewer had to be repaired temporarily in order to prevent nuisance, even though it was known that subsidence was continuing. Notice was given to the Colliery owners but at the end of 1946, no meeting had been arranged.

The work of relaying the Park sewer is still in abeyance, although I understand it is in the first priority when the time is appropriate for such work. I often wonder whether it will last until then.

Sanitary Conversions.—During the year 9 dry ashpits serving 25 houses were abolished and 25 bins provided in replacement. It was found possible also to require sundry conversions of privies, waste water closets and pail closets to be effected at 44 houses, although having regard to the shortages of materials and labour, this was not easy. The figures appended below show a gratifying total. Much preliminary work was done also to prepare further rows of houses for conversion, the figures of which I hope to give you in next year's report. Appended is a table showing what was actually performed in 1946.

Table

13 privies and 7 ashpits—replaced by 14 water closets and 14 dustbins.

22 waste water closets —replaced by 22 wash down closets.

1 pail closet —replaced by 1 water closet.

Milk and Dairies.—The work of inspection and control under this heading becomes less onerous year by year. Veterinary inspection of the cattle is done by the Ministry of Agriculture and Fisheries; sampling for quality is performed by the West Riding County Council staff and resazurin samples for keeping quality are taken through the Milk Testing Advisory Board, all without our previous knowledge. If samples are found by the Milk Testing Advisory Board to be of poor keeping quality the information is passed to my Department so that an inspection may be made and advice given by this Department.

One such report was made during 1946 and together with the Advisory Inspector from the Milk Board, I visited the premises. The complaint of the farmer was that his churns were the first to be picked up on the collection route and the milk was therefore exposed to the heat of the day on the lorry and did not arrive at the milk depot until some time about mid-day, when the samples were taken, a process which he declared was unfair. I took this matter up with the Advisory Board but they pointed out that the samples could not be taken any other way, but did agree that I myself might take samples at the point and time of production. Unfortunately some of the samples taken were damaged during the process of being tested, but as a result of representations I have made, a new dairy and adequate water supply have been provided at this farm. A piped

water supply was also provided to two other farms in the area, which is a definite improvement from the Milk and Dairy point of view. The following details are relative to milk production in this district :—

No. of farms producing milk (one of which is Accredited)	..	28
No. of Retail Purveyors of Milk	.. .. .	36
No. of premises registered as Dairies	.. .. .	36
No. of Supplementary Licences under the Milk (Special Designations) Order	.. .. .	~6.

Meat and Food Inspection and Control.—Regional slaughtering still continues, therefore there was no routine meat inspections in this area. Nine pigs slaughtered privately were inspected.

A certain amount of useful work has been done, however, in the inspection of food other than fresh meat at retail shops and at a large Buffer Depot of the Ministry of Food, which is situate in this district. In all, 24 inspections were made and 19 lbs. of mutton ; 25 lbs. frozen beef ; 29 lbs. of bacon and ham ; 7 lbs. of cheese ; and 299 lbs. of tinned and prepacked food together with 420 eggs were inspected and removed as being unfit for human consumption. They were disposed of either to food salvage or by destruction, according to their respective merits.

Water Sampling.—I have said previously that the water supply is *in the main* drawn from the water undertakings of larger authorities in the vicinity, but I am very happy to say now that *all* water used domestically is from these sources. During the year, the wells supplying two farms and three cottages were closed and water supplied to the premises mentioned from the water mains of this authority. This is particularly satisfactory and is a decided improvement on the state of affairs in 1937, when seven wells supplied quite a number of houses and farms.

Routine sampling of the water is still carried out and during 1946, 20 chemical and 22 bacteriological samples were analysed. Three bacteriological samples were reported as being unsatisfactory, but on resampling were found to be in order.

Petroleum.—During 1946, 33 licences were issued to store Petroleum spirit, 30 of these being renewals, 1 a transfer and 2 for newly erected premises where the tanks and fittings were tested and approved by this Department before issuing the licences. In all, 2,020,750 gallons of petrol were stored. No complaints or accidents were recorded in connection with these petroleum spirit stores.

Sanitation at Elementary Schools.—With the conclusion of the war and the release from certain war-time duties, I was able to devote more time to a task I have had in mind for a considerable period, that is the inspection of the sanitation at the Elementary schools in this district. My inspection revealed that the type of conveniences provided for girls and boys in this area was, in several cases, much below the normal standard of conveniences in the district, a very deplorable state of affairs, and the whole matter was reported to the Education Department of the County Council, with suggestions and recommendations. The County Council read my report and entered into preliminaries to correct the faults outlined, but no positive work was done in the course of the year. I hope later, however, to be able to report to you that the school sanitation is of a standard at least equal to that in the rest of the district. My own feeling is that it should be higher and certainly far above its present state.

Food and Drugs Act.—Inspections are made from time to time of premises where food is prepared or sold, and in particular a survey was made of part, though not all, of the premises where fish and chips are prepared. This survey was not completed, however, but I hope that this will be in the succeeding year, when I will be able to report to you what defects found have been remedied.

Disinfection and Disinfestation.—We still remain fairly clear of infestation due to the bed bug and I am still not satisfied in my own mind, as to whether the few reports we have, or the cases we find, are due to the reluctance on the part of those afflicted to report such things or whether we are really fairly clear.

We still continue to inspect all prospective tenants' effects before their entry into Council houses and although this takes a considerable amount of time, it is well worth-while on the theory that prevention is better than cure. Any such effects which are found to be verminous are treated before being accepted into Council houses.

There is still a diversity of opinion as to the relative merits of D.D.T., Gammexane and the disinfesting materials which we were accustomed to use pre-war. Apparently there is a lot more field work to be done before a didactic opinion can be given and it is perhaps worthy of mention that no official pronouncement about either of the two new products has been made by the Ministry of Health.

The number and types of treatment given to the various houses are set out below.

Disinfections are small because we do not in the ordinary way disinfect after Scarlet fever has occurred and the number of Diphtheria cases has, fortunately, been particularly small.

- 9 Disinfections after removal of cases of Infectious Disease.
- 2 Disinfections of empty Houses.
- 23 Disinfestations of houses for vermin.
- 2 Disinfections after death of inmates.

36

Smoke Abatement.—No observations have been taken during the current year and the two nuisances which have come under this heading have been grit emission from the chimney of a large works, previously referred to and the nuisance from a colliery spoil bank. In the first case, designs and estimates for grit arresters have been approved by the proprietors of the works concerned and in the second, the colliery spoil bank has been so well maintained that the nuisance had been reduced.

I have again represented Rothwell Council upon the West Riding Regional Smoke Abatement Committee.

Public Conveniences.—Four public conveniences situated in various parts of the area have, during the year, been maintained in an efficient state. The customary trouble of interference, by persons unknown and uncaught, with locks and sanitary fittings still continues. It seems strange that there are persons who are prepared to interfere with such buildings which are provided for the convenience of the public and it is also peculiar that these offenders can never be detected. One appreciates that Council officials and staff are not always there and the police have other things to do besides keep observation upon public conveniences, but it seems to me that there should be enough public minded citizens to give information regarding these offences. However, they do not and the public have to suffer in consequence.

Mortuaries.—The three Council-owned and controlled mortuaries have been maintained in a satisfactory state and no complaints have been received in connection therewith.

Rats.—This Department still continues the work of rat elimination as required by the Ministry of Food, although, as previously, the amount of damage in this district is not extensive nor severe. We do, however, deal with all complaints and in all, twenty-five premises were treated, good results being in the main obtained.

Statistical Record.—For your information, consideration and comparison with the previous year, I append in a statistical form the chief details of the number and type of inspections which have been made during the year. These you will observe show an increase on last year, because during the whole of the year, from January to December, you had the services of myself and Mr. Idle as full-time inspectors. The total number of visits is eminently satisfactory and, when you add to this the amount of inside work and interviews with owners, agents, contractors and so forth, you will appreciate that the Health Department staff do not waste any time.

INSPECTION OF THE DISTRICT.

Inspections under Housing Acts	388
Inspections under Public Health Acts	595
Reinspections under Housing Acts	231
Reinspections under Public Health Acts	279
Tents, Vans and Sheds	15
Inspections for vermin	157
Rats and Mice (Destruction) Act	178
Infectious Diseases investigation :—	
Scarlet Fever	94
Suspected Diphtheria	8
Other	52
Food and Drugs Act, 1938	71
Dairies and Cowsheds	17
Water samples taken	42
Factories and Workshops	20
Smoke Abatement	21
District Ambulance	22
Petroleum Storage	29
Mortuaries	28
Sewer and Drainage inspections	536
Cesspools and Septic Tanks	10
Public Cleansing service	378
Plant Maintenance	8
Public Conveniences	167
Sanitary Conversions	351
Schools	13
	3,710

WORKS CARRIED OUT.

Drains cleared from obstruction	284
Sink waste pipes cleared	8
Defective dustbins renewed	486
Roofs repaired	30
Chimney stacks repaired	10
Eaves gutters repaired or renewed	13
Rainwater pipes repaired or renewed	10
External walls repaired or repointed	11
Water closets repaired	40
Drains repaired or renewed	20
Pails renewed	0
Water services repaired or renewed	12
Internal walls repaired or replastered	19
Ceilings replastered	5
Windows repaired or renewed	28
Doors repaired or renewed	8
Floors repaired or renewed	10
Fireplaces repaired or renewed	16
Sinks renewed	11
Sink waste pipes renewed, refitted or repaired	16
Set pots renewed	3
Sanitary Conversions	37
Dry ashpits abolished	9
Dustbins provided in lieu of ashpits	25

Staff.—K. R. Lawson, Junior pupil clerk, was called to the Forces in November, 1946, for his two years conscripted military service. This will make a break in his training and provide a break in the continuity of our services. Mr. H. T. Hodgson, who has been in the Forces since April, 1942, was at the end of the year demobilised and will return in the early part of 1947, so the staff changes balance one another and we hope to be able to continue with the sort of work which the conditions at present prevailing permit.

I cannot conclude this report without paying tribute to the assistance and support which I received from all members of my staff and for the co-operation of the Medical Officer, the Clerk and the members of the Health Committee and Council. These tributes, though often repeated, are, I would assure you, none the less sincere, and it makes my task much lighter to feel that other people help and appreciate the work which we do.

I am, Ladies and Gentlemen,

Your obedient Servant,

THOS. WILSON.

